PTO/SB/06 (08-03)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY **FOR** NUMBER FILED NUMBER EXTRA RATE FEE **BASIC FEE** RATE FEE (37 CFR 1.16(a)) \$ OR **TOTAL CLAIMS** (37 CFR 1.16(c)) minus 20 = X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X \$ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR \* If the difference in column 1 is less than zero, enter \*0" in column 2. TOTAL TOTAL OR -CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY **CLAIMS** HIGHEST REMAINING PRESENT NUMBER RATE ADDI-**AMENDMENT** RATE ADDI-AFTER **PREVIOUSLY EXTRA** TIONAL **AMENDMENT** TIONAL PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) Independent Minus (37 CFR 1.16(b)) X \$\_ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** REMAINING NUMBER **PRESENT** RATE Z ADDI-RATE **AFTER** ADDI-**PREVIOUSLY** EXTRA TIONAL **AMENDMENT** TIONAL AMENDME PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) **OR** X S Independent Minus = (37 CFR 1.15(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +\$ OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING **PRESENT** NUMBER **RATE** ADDI-**AMENDMENT** RATE ADDI-**AFTER PREVIOUSLY** EXTRA TIONAL TIONAL **AMENDMENT** PAID FOR FEE Total FEE Minus (37 CFR 1.16(c)) OR Independent Minus \*\*\* = (37 CFR 1.16(b)) X 5\_ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + \$\_ OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. \*\* If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20". \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECOR Effective December 29, 1999							09/539461				
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMA TYP	LL ENTITY	OR	OTHER SMALL	<del></del>	
FO	R	NUMBE	R FILED NUMBER EXTRA		RAT	E FEE		RATE	FEE		
BA	SIC FEE						345.0	OR		690.00	
то	TAL CLAIMS		3 minus 20=		•		)=	OR	X\$18=		
IND	EPENDENT CL	AIMS.	L		•		=	OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT						+130	)=	OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA	AL .	OR	TOTAL	090	
(Column 1) (Column 2) (Column 3)						SMA	LL ENTITY	OR	OTHER SMALL		
4		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	. ADDI- E TIONA FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	.21	Minus .	-20	= /	X\$ 9	= 9	OR	X\$18=		
AME	Independent	· 3	Minus	*** 3	=	X39		OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+130	)=	OR	+260=		
11/28/03					TO ADDIT. I	TAL G	OR	TOTAL ADDIT. FEE			
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- E TIONA FEE		RATE	ADDI- TIONAL FEE	
	Total	.21	Minus	.21	=	X\$ 9	=	OR	X\$18=		
	Independent	• 3	Minus	** 3	=	X39		OR	X78=		
	FIRST PRESE	NIATION OF M	OLTIPLE DEF	PENDENT CLAIM		+130	)=	OR	+260=		
						TO ADDIT, I	TAL	OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<del></del>		•	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- E TIONA FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**	=	X\$ 9	)= ·	OR	X\$18=		
AME	Independent	*	Minus	***	=	X39	=	OR	X78=		
	FIHST PRESE	NIATION OF M	ULTIPLE DEI	PENDENT CLAIM		+130	)=	OR	+260=		

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

TOTAL

TOTAL

ADDIT. FEE

OR

ADDIT. FEE

TOTAL

ADDIT. FEE

ADDIT. FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 12/99)

Application or Docket Number